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Eau Claire Area School District

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Eau Claire, a community of over 58,000 people, is located in the rolling hills and Chippewa River valleys of west-central Wisconsin. Eau Claire was a booming logging town during the mid-to-late 19th century. As the logging industry declined, a more diverse economy arose, making Eau Claire today the home of some of the country's most sophisticated and technologically advanced manufacturing.

The Eau Claire Area School District has a student population of about 11,500, of which nine percent are Asian American (with the majority Hmong), African American, Hispanic, and Native American students each comprise three percent of the school population. This diverse population also has 27 percent of students qualifying for free or reduced-price lunches.

Eau Claire is the largest school district in north-west Wisconsin. It has two high schools, three middle schools, 16 elementary schools, and one charter school with 981 licensed instructional staff. The district has moved toward site-based management, with each building encouraged to design a 3-5 year site plan based on long-term district goals. The development of site plans at most district buildings has provided an opportunity to increase understanding of health and prevention issues and to develop strategies for addressing them at both the building and district levels. Building administrators and/or site committee chairpersons and the district Health Education and AOD Prevention coordinator work together to guide these collaborative efforts.

Implementation Strategies

The Framework as Organizational "Sense-Maker"

The district has a long-term commitment to health and prevention programs. When current Health Education and AOD Prevention Coordinator Sharon Gilles joined the district staff in 1994, she entered a well-established program that was already moving in a comprehensive direction. She was familiar with the Wisconsin Framework for CSHP, developed during her six-year tenure on the State Superintendent's Advisory Council on Alcohol and Other Drugs. Therefore, she was able to systematically utilize the Framework as an organizational "sense-maker" in three major ways by:

- providing a basis for understanding the current status of the district's health programs and identifying gaps and overlaps;
- helping other staff understand the meaning and potential scope of comprehensive school health programs and connect their efforts to this bigger picture; and
- providing direction for future efforts.

Specifically, as the Health Education and AOD Prevention Coordinator was becoming familiar with district programs, she used the Framework as an organizational tool, categorizing programs mentally and visually by components. She asked for further information and clarification from other staff, using the same visual and adding or moving "post-it" notes representing various programs in each component. Thus, she (and staff with whom she consulted) gained greater understanding of both the "big picture" and connections among individual programs.

Next, she used a visual of the Framework with various staff teams (for example, middle and high school staff responsible for teaching health courses or building teams), asking them to consider how their work fit into the Framework and to identify gaps and overlaps among programs. Finally, when preparing grant applications she used the Framework as a visual to help her keep this version of the district's "big picture" in mind.

The Health Education and AOD Prevention coordinator notes that the Framework itself seemed to be a credible and useful tool for other district staff, in part because it was a statewide Department of Public Instruction initiative. Furthermore, the Framework validated what the district was already doing—taking a comprehensive approach to health education and prevention.

Grant Support

Programs in all components of the Framework are supported in part by combined funding from federal Safe and Drug Free Schools and Communities Act entitlements and competitive grants. The district submits a consolidated Improving America's Schools Act (IASA) plan in which funds from various federal programs (Titles I, II, IV, and VI) are combined into one overall district plan of action.

The Health Education and AOD Prevention coordinator has actively participated in this process, again using the Framework with other staff as an organizational "sense-maker." Along with the director of auxiliary programs and the executive director of instructional services, she has shared principal responsibility for writing the consolidated IASA plan. She believes that the process of IASA planning has strengthened connections and increased awareness across programs as well as enhancing the ability of district staff to work collaboratively. The planning process has gone from one of information sharing to actual collaborating.

In addition, competitive grants have provided substantial funding for district health education and prevention programs, including the following: federal Safe and Drug Free Schools and Communities Act High Need Grants, State AOD Program Grants, Alcohol and Traffic Safety Grants, DARE Grants, and DPI Student Mini-Grants. As previously mentioned, grant applications are written with the Framework serving as an organizational tool.

Site-Based Management

Site-based management has been a critical tool for articulating the Framework and incorporating

health education and prevention issues into the district's planning and budget process. Each component of the Framework may take on a particular character, depending on how it is implemented at a particular site. Site-based plans become instrumental in the IASA planning process, providing an important vehicle to link the Framework as well as health education and prevention issues into the development of wider district initiatives (such as curriculum integration, critical thinking, authentic assessment, and action research as a form of staff development). In retrospect, the Health Education and AOD Prevention coordinator believes that the district's initiation of site-based management at approximately the same time as implementation of the Framework has been beneficial.

Input from the Community

Community input into the health and prevention curriculum and related programs is provided by a 20-member School-Community Advisory Council, which meets 3-4 times a year. Members include representatives from:

- each building level (elementary, middle, and secondary),
- administrators
- school nurses
- Department of Health and Family Services
- Eau Claire Coalition for Youth
- Healthy Communities 2000
- PTA
- law enforcement
- clergy
- service providers
- parents
- YMCA
- Big Brothers/Big Sisters
- the district school-age parent coordinator

The council represents strong links to the wider community, and its work is integrated with continued development of site-based plans. In addition, this districtwide school health committee addresses policy and administrative practice issues that affect all schools.

Two overall district priorities for health and prevention programs have emerged from this interaction of organizational structure, implementation strategies, district and building staff input, and community involvement:

- integrating the health and prevention curriculum throughout the district's academic programming, and
- strengthening school-community connections. These priorities are visible throughout the following descriptions of the district's efforts in each of the Framework components.

Healthy School Environment

Each building is striving to foster a healthy school environment in which *all* students can be healthy, successful, and resilient learners by working toward a climate in which differences are respected. For example, one site plan states: "We will create a plan to ensure an environment of respect and understanding of the diverse population." These goals go beyond a specific program or classroom to encourage involvement from everyone who has any connection with the school.

The district and wider community worked together to identify and further clarify the meaning of community core values (honesty, respect, responsibility, compassion, courage, and justice). Several buildings have integrated these core values into their site plans and/or goals, and some community organizations are developing strategies for integrating them into their workplaces and programs.

Cultural Competence

In the past several years, the Eau Claire Area School District has made a concerted effort to constructively address challenges associated with the influx of Hmong and Cambodian families to the Chippewa Valley area. It is striving to embrace cultural competence as an essential skill for all school staff. Cultural competence includes both an appreciation of multiple forms of difference (such as gender, race, ethnicity, physical/mental ability, and sexual orientation) and efforts to address diversity issues across both the formal and informal school curriculum.

Action Research

One example of an effort to foster a healthy school environment is occurring at an elementary school in which staff members are participating in a three-year action research process. This statewide initiative, organized and funded by the Wisconsin Department of Public Instruction, works with school teams to improve health and safety curriculum, instruction, and assessment. An in-

terdisciplinary building-based team (consisting of the principal, classroom teachers, an ESL teacher, bilingual teacher assistant, guidance counselor, and the district Health Education and AOD Prevention coordinator) is exploring the following question, What are effective strategies for increasing students' tolerance of and appreciation for differences to foster a healthy and safe school environment? The district will use the process and outcomes of this effort by

- providing further direction to the overall move toward action research as a form of staff development and
- providing ideas to other sites for strategies to improve attitudes and behaviors across differences.

Conflict Resolution

Conflict resolution is another districtwide initiative fostering a healthy school environment. District staff researched conflict resolution approaches to identify one that provides a balanced focus for adults and students. Ellen Raiders' *Conflict Resolution through Collaborative Negotiation* model (1992) also complements the critical reflective approach to which the Eau Claire district aspires. To date, 125 teachers and support staff from 17 buildings as well as district administrators have participated in the two-day training, and four people are being prepared as trainers. (See a related focus on peer mediation in the section on Student Programs.)

Policies and Procedures

Finally, two district documents provide detailed, up-to-date information on policies and procedures that address health and safety issues. The *Parent/Student Handbook* is mailed to every family at the beginning of each school year. The district's crisis plan is distributed to building administrators, and all-staff inservices provide additional information.

Curriculum, Instruction, and Assessment

The Eau Claire Area School District completed a school evaluation consortium process in the spring of 1994. One recommendation from that evaluation was to integrate the health and wellness curriculum throughout other academic programs. The district began implementing this recommendation by focusing first at the elemen-

tary level, using National Health Standards as outcomes. Staff then explored what was needed for children to achieve these outcomes and developed target questions for each grade level and standard. Next, they examined all curricular areas to determine whether or how these questions might be addressed and what might be done to support health education in each academic area. This led to the development of the current resource-based, integrated pre-K to grade 5 curriculum. Areas of integration include art, music, social studies, reading, language arts, mathematics, science, developmental guidance, and physical education.

Classroom teachers report a high degree of satisfaction with this approach. Because it does not create a separate program requiring additional planning and implementation time, teachers say they can accomplish several objectives simultaneously. For instance, the health curriculum is infused into the reading of literature. Teachers can achieve reading goals while accomplishing health and wellness goals.

Health education is required at grades 6-9; one quarter is required in grades 6 and 7 and one semester in grade 9. Health is offered as an elective in grade 8. Curricular topics include nonuse of alcohol, tobacco, and other drugs; healthy lifestyles (that is, exercise and nutrition); sexuality education (which includes HIV/STD and pregnancy prevention); and violence and injury prevention. Several other content areas—social studies, science, family and consumer education, and driver's education—also incorporate these concepts. Because critical thinking is emphasized and integrated across all K-12 curricular areas, students are provided many opportunities to learn about various health and wellness-related topics and issues from multiple perspectives and to develop skills in making reasoned decisions. Health education provided by peers is another significant part of the district's curriculum (see the Student Programs section).

The Eau Claire Area School Board is highly supportive of this curriculum. Indeed, the board recently invited the Health Education and AOD Prevention coordinator to address a delegation of Japanese educators about the program. The district also received the 1998 Exemplary School Health Instruction Award from the Wisconsin Partners for Health Literacy.

Pupil Services

The Eau Claire Area School District understands the value of and is committed to providing adequate funding for pupil services. The

Pupil Services Teams in each of the Eau Claire schools include a psychologist, school social worker, counselor, school nurse, and administrator. The nine psychologists, four social workers, and 13 school nurses are shared by all schools; 14 elementary counselors serve 16 elementary schools, nine middle school counselors serve the three middle schools, and 10 high school counselors serve the two high schools. Teams meet weekly and design intervention strategies and prevention plans.

Pupil services staff are also involved in curriculum development and delivery. School guidance counselors implement the developmental guidance curriculum and a newly developed series of 16 lessons utilizing puppets to help children learn about problem solving (personal and social), school work skills, feelings, family changes and issues, self-esteem, and group skills. The owl, deer, otter, and porcupine puppets each have personality traits that are used during the lesson to support the major concept. Guidance counselors as well as teachers at most schools work extensively with a number of student programs.

Student Programs

Because of the district's commitment to site-based management, schools are able to offer programs that best meet their students' needs or address their strengths. Although each school is afforded some autonomy in the development of student programs, all staff are expected to be alert to the needs of all learners, to address those needs in a variety of ways, and to recognize that young people can play a significant role in conveying positive health-related messages to peers and younger children. Based on these broad expectations, schools exercise choice about which programs to offer, with ownership and identity developed by each school.

In using the Wisconsin Framework as a means to assess district programs, district staff identified a major gap in the Student Programs component. They found that several programs converged at the fifth-grade level ("the fifth-grade aneurysm"), with other grade levels served less well, particularly at the middle school level. This provided impetus for discussion and sometimes challenging renegotiations of program focus at the building and district levels. Attention continues to be given to providing programs to address a variety of identified needs at the elementary, middle, and high school levels.

Student programs offered in most schools can be broadly categorized as support groups (following a Student Assistance Program model), peer education, leadership, and peer support/mediation groups.

Support Groups

At the elementary level, guidance counselors provide group opportunities as needed. In grades 6-12, schools offer students small groups (referred to as Change Groups) that focus on specific concerns identified by surveying students and staff, including

- Anger Management
- Coping with Chemical Use/Abuse
- Changing Relationships
- Changing Families
- Self Growth/Self Discovery
- Understanding Differences
- Loss and Grief
- Smoke Enders (high school only)

Specially trained staff facilitate these groups; facilitators make use of a binder containing the content and process for discussing each topic. Grant funds paid for staff time to compile and organize the binders.

Students may self-refer to these groups, or they may be referred by teachers, guidance counselors, administrators, parents, or friends. Co-facilitators are trained to refer group participants to the guidance counselor whenever they become aware of a need that goes beyond what can be addressed by these curriculum-based groups.

Peer Education

CLOWNS (Children Learning Other Ways Naturally): This AOD education program is delivered by high school students who are trained as CLOWNS and then go into K-3 classrooms to discuss AOD-related issues. There are two different presentations, one for K-1 and another for 2-3. The primary goals of the program are (1) to aid in the development and enhancement of attitudes and behaviors through the exploration of alternatives and peer pressure and (2) to provide accurate information concerning AODA. Currently 30 students are trained as CLOWNS, and they present to all K-3 students in a dozen elementary buildings.

Peer Pressure: The classroom component of this program takes 3-7 sessions. The first two days involve instruction about positive and negative peer pressure. Guidance counselors and/or classroom teachers facilitate these activities. High school juniors and seniors are trained to work with fourth graders on the third day of instruction. Groups of eight high school students perform role-plays dealing with peer pressure and then discuss these with the class. After dividing the class into four small groups, two high school students go with each group and conduct discussions with the fourth graders that involve peer-pressure situations (themselves developed by fourth graders) and positive responses. Classroom teachers and/or guidance counselors may then choose to continue the lessons on an as-needed basis. Approximately 70 students are trained for Peer Pressure, and they rotate through all 16 elementary buildings.

DARE Panel: As part of the DARE program, a panel of six high school students talks with fifth graders about adapting to life at the middle school level. They also tell students what activities they are in and then respond to questions. Their responses usually involve examples of how they have been able to stay free of alcohol and other drugs and why they think this is important. Sixty students are trained for the DARE panel, and they too rotate through the 16 elementary schools.

TATU (Talking about Tobacco Use): Seventh and eighth graders receive training on the disadvantages of tobacco use. They then prepare and present an American Cancer Society program to fourth and fifth graders. The focus on middle school presenters is in response to the increase in cigarette smoking reported between grades 6 and 8. Approximately 70 middle school students are working with this program.

Arrive Alive: High School juniors and seniors are trained to teach students in the required ninth-grade health course a three-day unit about the disadvantages of drinking and of drinking and driving. This program operates at both high schools and involves approximately 150 trained students.

MAGIC (Making A Good Intelligent Choice about HIV/AIDS): Tenth- through twelfth-grade students are trained to talk about AIDS/HIV to students in the required ninth-grade health class.

Leadership

Student Council: Many elementary buildings and all secondary buildings have organized student councils that promote leadership and offer students opportunities for meaningful participation in school life. The types of student involvement and activities are determined at each building.

POPS (Power of Positive Students): The POPS premise is that there is a strong correlation between a student's self-concept and academic achievement. POPS focuses on identifying student potential and strengths, encouraging positive actions, and celebrating student success. A reward system is built into the program to encourage positive behaviors among elementary students. Students earn points by engaging in positive actions. As points add up, each student has the opportunity to "purchase" a variety of rewards. These daily positive actions of students add up to create a friendly and positive environment in the school.

CHAMPS (Champs Have and Model Positive Peer Skills): Fifth graders participate in a training that explains CHAMPS and their role as leaders in their building. Following the training, students identify concerns and areas of interest they think should be addressed in their building. Groups of students volunteer to form committees to develop activities and programs in response to these needs. Some students participate in projects that involve AOD instruction with younger children. Others direct playground activities during recess; still others may work on building and grounds beautification projects.

Peer Support/Mediation

Peer Mediation: Peer mediation training is provided for students who then serve as mediators for specified conflicts that occur among their peers. These programs are in place at the middle and high school levels.

Natural Helpers: High school students receive training in listening to peers and helping them resolve their problems. When appropriate, they make referrals (usually to the school counselor) for additional help. Trainings are held in the summer for students who will be in grades 9-12 the following year.

Fellowship for Christian Athletes: Middle and high school athletes meet outside school hours within their building to support one another in

making healthy choices for themselves and fellow athletes.

SADD (Students Against Destructive Decisions): Students actively participate in chapters at both high schools, organizing several AOD programs and projects throughout the year. For example, they help secure special speakers and send birthday cards to students on their 16th birthday: "A little piece of advice on your 16th birthday. Please DON'T DRINK AND DRIVE! We wish you a Happy and Safe Birthday! Because We Care!" During Prom week, SADD turned school hallways into streets with billboards reminding students of the dangers of driving while or riding with someone who is under the influence of alcohol or marijuana.

Adult Programs

Staff Development

Staff development opportunities are provided on an ongoing basis around health and wellness-related issues. These are generally in response to a need that has been identified by staff. For example, building site-plans indicate areas of interest and/or need for staff development at each building. When warranted by the number of requests, these opportunities are coordinated districtwide.

More specifically, the district provides staff development opportunities in three major health and prevention areas:

- Student Assistance Program (SAP), Core Training, Co-facilitation, Advanced Co-facilitation; and Rejuvenation;
- Conflict resolution through collaborative negotiation (see the section on Healthy School Environment); and
- Classroom student management using the *Discipline with Love and Logic* program.

In addition, opportunities are provided for staff participation at relevant regional, state, and national conferences such as Research on the Brain and Learning, Resiliency, Teaching Toward a Multi-Cultural Society, Critical Reflection, State Prevention Conference, and the National SAP Conference.

Employee Wellness

The district's Wellness Committee has representatives from each building. Districtwide activities are organized by this group (for example, bone

marrow donors, jazzercise, volleyball, basketball, walking/running/exercising, line dancing). In addition, staff activities are planned at the building level.

Parenting Programs

Parenting programs are usually organized in response to expressed need or issues that come to the attention of the district. For example, the Hmong Mutual Association made a request for adolescent and parent programs designed to address some issues unique to the culture. All parenting programs are based on the idea that all people need support to raise children.

Several parenting education programs are offered throughout the year for parents of K-8 children; these programs range from guest speakers to a series of classes. Parent Resource Centers are located in most buildings. Parents can check out materials from these centers for use at home.

Family nights are hosted by several buildings and include such activities as cooking together, playing board games, and the like. Many buildings also host “signing nights” for parents and students to indicate their commitment to education for the school year. In an attempt to bridge the generation and cultural gap between Hmong youth and parents, the district has hosted several events with speakers.

Family and Community Connections

The Eau Claire Area School District has long been committed to working with area law enforcement; Eau Claire County Human Services; and community-based organizations that have children, youth, and families as their focus of service. The district Health Education and AOD Prevention coordinator is actively involved with several other community groups in addition to facilitating the School-Community Advisory Council, which provides community input into health-related curriculum and other programs.

Eau Claire Coalition for Youth

The Eau Claire Coalition for Youth is an inter-agency organization that serves to enhance and promote the healthy, comprehensive development of Eau Claire children and youth through collaborative action. The Coalition functions as an advocate, catalyst, and developer for collaborative planning and implementation of comprehensive services and systems benefiting children, youth, and families.

The district Health Education and AOD Prevention coordinator serves on two subcommittees: **The Health and Safety Subcommittee** examines how to provide a continuum of care (initial screening/treatment/after-care) for mental health and AODA services to adolescents in Eau Claire County. The subcommittee is composed of representatives of service and health insurance providers as well as educators.

The Education Subcommittee organizes community forums and workshops on such topics as “Community Values” and “Understanding Hmong Culture” (presentations to help Hmong parents better understand the generation and cultural gaps that they deal with when raising their children). Members of this subcommittee include a representative from the Girl Scouts, Eau Claire County Extension, Hmong Mutual Association, parents, service providers, and educators.

Healthy Communities 2000

Healthy Communities 2000 is Eau Claire’s Family Preservation and Support program, the county health-prevention program by the Wisconsin Department of Health and Family Services (DHFS). Members of the task force include law enforcement, United Way and Department of Health and Family Services staff, service providers, health department staff, clergy, and school district staff.

An example of the importance of community connections occurred in the context of this group. An asset assessment of eighth graders in the district (originally planned in cooperation with the Minneapolis-based Search Institute) has been expanded with DHFS funding available through Healthy Communities 2000 to a countywide asset survey at two grade levels. This survey will provide valuable information for curriculum and program development as well as an opportunity for educators, service providers, government officials, and parents to learn more about assets-based education and community development. Another example of a significant collaborative effort is a countywide task force that focuses on reducing alcohol, tobacco, and other drug use by young people to levels below the national average.

Other Community Connections

Chippewa Valley Tobacco Free Coalition: A local group that develops activities and promotional campaigns to reduce and discourage youth

tobacco use, membership includes representatives from law enforcement, the county health department, physicians, the fire department, the American Cancer Society, and educators.

Underage Diversion Program: The district cooperated with Eau Claire law enforcement and judges to develop this program, which has existed since 1994 for young people cited for underage drinking. The program offers the option of undergoing initial assessment and attending classes on alcohol and other drug issues (for a fee) in lieu of the fine. After the assessment, local community agencies provide classes for violators age 17 and under, and Chippewa Valley Technical College provides classes for violators age 18 and over. The University of Wisconsin-Eau Claire provides classes for violators who are UW-Eau Claire students. Members of the program committee who meet on an as-needed basis to evaluate and address problems as they arise include judges, the city attorney, staff from Chippewa Valley Technical College and UW-Eau Claire, service providers, juvenile intake workers, and clerks who work with the court system.

Morning Rotary Club: The Eau Claire Area School District Wellness Committee works with this service organization to raise funds to support the elementary AOD curriculum/program. A “Super Teams” event is held in July when businesses sponsor teams to compete in relay-type competitions. Points are awarded, and all participating organizations get free use of the athletic club for one month. Funding also goes to other community groups (for example Community Table and Habitat for Humanity).

Parent Involvement

District and building administrators are committed to focusing on parent involvement, which includes providing after-school and evening programs on parenting and parenting skills, “compact” signing (parents and children formally agree that the parent will be involved in the child’s education all year), and parents learning how to help with reading and other learning experiences that their children take home.

The district’s commitment is also apparent through the Parent Resource Centers that exist in some school buildings. Staff have gathered grade level-appropriate materials and made them available for students to take home on a rotating basis. These materials include videos, board

games, and pamphlets describing “book-in-a-bag.” The idea is to get materials to the parents rather than expecting that parents will come to the materials.

Future Directions

Overall, the district’s growing commitment to healthy children, youth, and families is evident in the comprehensive program it has developed by systematically using the Framework as an organizational tool. This program development will continue, with an emphasis on connecting with parents and the wider community, ongoing assessment of programs, and efforts to promote school environments in which *all* students can be healthy, resilient, and successful learners.

Continuing Community Connections

The district will continue to strengthen its connections with the community. A particular priority will be the countywide collaborative efforts with Healthy Communities 2000 to implement the upcoming assets assessment, which will be used to develop further programming. The School-Community Advisory Council will continue to provide input for the district’s comprehensive school health programs. The work of this council will integrate well with the continued program development occurring at each building in the context of the site-based management process.

Ongoing Self-Assessment

The Framework self-assessment instruments available from DPI will be used at the building level to identify to what extent each component is being addressed. These self-assessments will become part of the ongoing districtwide IASA planning and assessment process.

Conflict Resolution

This initiative to foster healthy school environments will continue to be a priority, with staff already prepared as trainers conducting additional training. The first desired outcome is that staff across the district will become role models for dealing constructively with conflict. The district also intends to develop opportunities for parents to increase their understanding and skill level related to conflict resolution. Finally, conflict resolution will be integrated into the classroom curriculum.